

COPY OF PAPERS  
ORIGINALLY FILED

2836

PTO/SB/122 (10-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF  
CORRESPONDENCE ADDRESS  
Application**

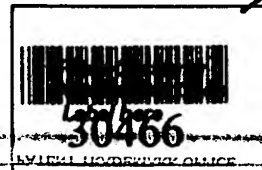
Address to:  
Assistant Commissioner for Patents  
Washington, D.C. 20231

Application Number	10 / 017,623
Filing Date	12 / 15 / 2001
First Named Inventor	Malcolm A. Burke
Art Unit	2836
Examiner Name	?
Attorney Docket Number	?

#3  
Change Address  
L. A. Burke  
A-302

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number 30466  
Type Customer Number here



OR

☒ Firm or Individual Name

MALCOLM A. BURKE

Address

1613 30<sup>TH</sup> ST NW

Address

APT 1N

City

WASHINGTON

State

DC

ZIP

20007

Country

USA

Telephone

202. 339. 6366

Fax

202.342.0807

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ Attorney or Agent of record.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

RECEIVED  
JUN -5 2002  
TECHNOLOGY CENTER 2800

Typed or Printed  
Name

MALCOLM A. BURKE

Signature

M. Burke

Date

5/15/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Assistant Commissioner for Patents  
Washington, DC,  
20231

**ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED**